



11/21/05

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Ünal GAZYAKAN, Detlef BAASCH, Christoph
Serial no. : PELCHEN and Barbara SCHMOHL
Filed : 10/776,564
For : February 11, 2004
Group Art Unit : TRANSFER CASE WITH CONTROLLABLE CLUTCH
Examiner : 3681
Docket : Richard M Lorence
ZAHFRI P607US

The Commissioner for Patents
U.S. Patent & Trademark Office
P. O. Box 1450
Alexandria, VA 22313-1450

**SUBMISSION OF PROPOSED DRAWING AMENDMENTS
FOR APPROVAL BY EXAMINER (37 CFR 1.123)
AND NEW REPLACEMENT SHEETS OF DRAWINGS**

Dear Sir:

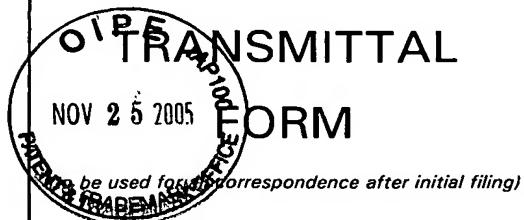
Attached hereto please find a copy of Fig. 1 of the pending drawings with red ink markings showing the proposed changes to the drawing of this application for which the approval of the Examiner is requested. Also enclosed is a new Fig. 2 for which the approval of the Examiner is requested. **Also enclosed are new Replacement Sheets of drawings which incorporate all of the requested drawing amendments.**

In the event that there are any fee deficiencies or additional fees are payable, please charge the same or credit any overpayment to our Deposit Account (Account No. 04-0213).

Respectfully submitted,


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OPIE TRANSMITTAL FORM <small>be used for correspondence after initial filing</small>	Application Number	10/776,564
	Filing Date	February 11, 2004
	First Named Inventor	Ünal GAZYAKAN et al.
	Group Art Unit	3681
	Examiner Name	Richard M LORENCE
	Total No. of Pages in this Submission: 30	Attorney Docket Number ZAHFRI P607US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee attached	<input type="checkbox"/> Assignment papers <i>(for an Application)</i> <input checked="" type="checkbox"/> Drawings	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Response <input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request <i>(in Duplicate)</i>	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> To Convert a Provisional Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Response to Missing Part/s Incomplete Application	<input type="checkbox"/> Small Entity Statement	Postcard Terminal Disclaimer Submission of Proposed Drawing Amendment(s) English translation of DE 103 07 019.2
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	

REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

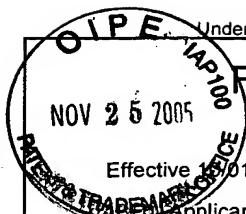
Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	November 22, 2005	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 22, 2005.

Type or printed name	Michael J. Bujold
Signature	
	Date: November 22, 2005 (lfb)

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FEE TRANSMITTAL

NOV 25 2005

for FY 2005

Effective 10/01/2003. Patent fees are subject to annual revision.
Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT: \$1,150

Complete if Known

Application No.
Filing Date
First Named Inventor
Examiner Name
Group Art Unit10/776,564
February 11, 2004
Ünal GAZYAKAN et al.
Richard M LORENCE
3681

Attorney Docket No.

ZAHFRI P607US

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account:

Deposit Account Number: 04-0213

Deposit Account Name: DAVIS & BUJOLD, P.L.L.C.

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge-late filing fee/oath	
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for re-examination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Ext.for reply w/in 1 mon	
1252	450	2252	225	Ext.for reply w/in 2 mon	
1253	1,020	2253	510	Ext.for reply w/in 3 mo\$1020	
1254	1,590	2254	795	Ext.for reply w/in 4 mon	
1255	2,160	2255	1,080	Ext.for reply w/in 5 mon	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a Brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
SUBTOTAL (1)		\$-0-			
4. CLAIMS					
		<u>Extra</u>	<u>Fee From Below</u>	<u>Fee Paid</u>	
Total Claims	-20*	=	\$ 50 (\$ 25)	x =	
Ind. Claims	- 3	=	\$200 (\$100)	x =	
Multiple Dependent	=		\$360 (\$180)	x =	
** or number previously paid, if greater; For Reissues, see below					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple dependent claim	
1204	200	2204	100	**Reissue independent claims over original patent	
1205	50	2205	25	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		\$-0-			

**or number previously paid, if greater; For Reissues, see above

Other fee (specify) #1814 Terminal Disclaimer

130

*Reduced by Basic Filing Fee Paid

SUBTOTAL (\$1,150)

SUBMITTED BY

Completed (if applicable)

Typed or Printed Name	Michael J. Bujold CUSTOMER NUMBER: 020210	Registration No.	32,018	Telephone (603) 624-9220
		Deposit Acct. No.	04-0213	Fax: (603) 624-9229
Signature				Date: November 22, 2005